
DO NOT COMPLETE UNTIL YOU READ THE INSTRUCTIONS AT END OF FORM

STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF LAW
ENVIRONMENTAL ENFORCEMENT SECTION. A-901 UNIT

**TEMPORARY A901 LICENSE FOR HURRICANE SANDY CLEANUP
BUSINESS CONCERN DISCLOSURE SHORT FORM**

Print or type all data, except where signature is required.

NAME AND MAILING ADDRESS OF APPLICANT:

ATTORNEY FOR APPLICANT: _____

NAME OF PERSON TO BE CONTACTED IN REFERENCE TO THESE FORMS:

Name: _____

Title: _____

Telephone: _____

Email: _____

This Disclosure Statement is being filed in support of an application for:

(check all that apply)

SOLID WASTE:

Temporary Hurricane Cleanup solid waste transporter _____

Temporary Hurricane Cleanup solid waste broker _____

Temporary Hurricane Cleanup transfer station _____

HAZARDOUS WASTE:

Temporary Hurricane Cleanup hazardous waste transporter _____

Temporary Hurricane Cleanup hazardous waste broker _____

OTHER (describe) _____

If you obtain a Temporary A901 License, what work do you plan to do? How is it related to the damage caused by Hurricane Sandy? Please attach any documents you possess to support your answer, including correspondence, contracts or bids.

DO NOT COMPLETE UNTIL YOU READ THE INSTRUCTIONS AT END OF FORMS

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PART I: APPLICANT IDENTIFYING DATA

1. NAME AND TRADE NAME OF APPLICANT. State the complete name of the applicant as it appears on the certificate of incorporation, charter, bylaws, partnership agreement, limited liability company, or other official document which establishes the name of the applicant. **A copy must be enclosed.** Also list any "trading as," "doing business as," fictitious, or informal name. If using a "fictitious" or a "trading as" name, attach proof that the name has been properly filed with the County Clerk, the Secretary of State or Division of Revenue.

Name: _____

Certificate of Incorporation #: _____ State of Incorporation: _____

Trade names: _____

Street address of principal office - **do not use P.O. Box:**

Telephone: _____ Email: _____

Website: _____

2. EXISTING REGISTRATIONS/PERMITS/I.D.s

NJDEP Registration No.(s) (if existing) _____

Federal DOT No. (if applicable) _____

USEPA I.D. (if applicable) _____

FEID No. (if applicable) _____

For purposes of questions 3 and 4, the term "solid waste or hazardous waste business" includes any location or facility operated by the applicant where solid waste or hazardous waste was/is (as applicable) treated, stored, or disposed of; transfer stations; terminals or business offices of collector/haulers or transporter operations; sanitary landfills; incinerators; resource recovery facilities; dumps; etc. It includes solid waste or hazardous waste activities which are no longer permitted.

3. APPLICANT'S FACILITIES IN NEW JERSEY. List all locations in the State of New Jersey which the applicant has operated in the last ten years, is currently operating or proposes to operate: any aspect of its solid waste or hazardous waste business (except as a small quantity generator), including offices. Enclose copies of the State-issued document authorizing applicant to operate the facility. If the solid waste or hazardous waste facility operates under a settlement agreement, consent order, or court order, attach copy of same and note below.

Address: _____

Description of Facility: _____

NJDEP Program Interest #: _____ EPA Program Interest #: _____

Address: _____

Description of Facility: _____

NJDEP Program Interest #: _____ EPA Program Interest #: _____

4. APPLICANT'S FACILITIES IN OTHER JURISDICTIONS. List all locations outside of the State of New Jersey which the applicant has operated in the last ten years, is currently operating or proposes to operate: any aspect of its solid waste or hazardous waste business, including offices. Enclose copies of the State-issued document authorizing applicant to operate the facility. If the solid waste or hazardous waste facility operates under a settlement agreement, consent order, or court order, attach copy of same and note below.

Address: _____

Description of Facility: _____

State Program Interest #: _____ EPA Program Interest #: _____

Address: _____

Description of Facility: _____

State Program Interest #: _____ EPA Program Interest #: _____

PART II: PARTNERSHIP/JOINT VENTURE DATA(Part III to be completed **only** by Partnerships or Joint Ventures)

5. If any business concern is listed below, a separate Business Concern Disclosure Statement (**not a Second-Level Statement**) describing that business concern must be completed and filed with this Disclosure Statement.

6. PARTNERS OR JOINT VENTURERS. List the following information as to each partner or joint venturer **and enclose agreement(s)**. Use additional copies of this page, as necessary. If a limited partnership, list limited partners separately under the heading "limited partners." **Each individual listed below must also complete and file with this Disclosure Statement a Personal History Disclosure Form.** Each individual listed below must also be listed on the Summary of Principals (Page 58). Do not provide SS# for any individual who has not signed the consent form for Disclosure of Social Security Number (Page 44).

Name: _____

Address: _____

FEID #: _____ Telephone: _____

Pick one: ☐ General Partnership ☐ Limited Partnership ☐ Joint Venture

Name: _____

Address: _____

FEID #: _____ Telephone: _____

Pick one: ☐ General Partnership ☐ Limited Partnership ☐ Joint Venture

Name: _____

Address: _____

FEID #: _____ Telephone: _____

Pick one: ☐ General Partnership ☐ Limited Partnership ☐ Joint Venture

PART III: EQUITY INTERESTS

7. SOLID WASTE OR HAZARDOUS WASTE INTERESTS. List any business concern, in any state, territory or district of the United States, or in any foreign country, which collects, transfers, treats, stores, recycles, processes or disposes of solid waste or hazardous waste on a commercial basis, in which the applicant has held or currently holds at least a 25% equity interest.

Name: _____ **Telephone:** _____

Address: _____

FEID #: _____ Equity Held From Month/Year ____/____ to Month/Year ____/____

% of Equity: _____ Description of Equity: _____

Name: _____ **Telephone:** _____

Address: _____

FEID #: _____ Equity Held From Month/Year ____/____ to Month/Year ____/____

% of Equity: _____ Description of Equity: _____

Name: _____ **Telephone:** _____

Address: _____

FEID #: _____ Equity Held From Month/Year ____/____ to Month/Year ____/____

% of Equity: _____ Description of Equity: _____

8. CORPORATE STRUCTURE. If the applicant is a subsidiary of a parent corporation, or is the parent of one or more subsidiaries, or is part of a conglomerate or a group of companies in common ownership, supply a chart showing the names, FEID numbers and relationships of all parent, sister, subsidiary and affiliate corporations, and/or members of the conglomerate or group. Include ultimate parents. This question applies to related companies in any business, not just the solid waste or hazardous waste business.

PART IV: EXPERIENCE AND CREDENTIALS

9. Describe the applicant's experience and credentials in the collection, transfer, transportation, treatment, storage, processing, recycling or disposal of solid waste or hazardous waste. Attach additional pages, as necessary.

[illegible]

Separate Form Attached? ☐ Yes ☒ No

PART V: INVOLVED INDIVIDUALS

10. Provide information below for all individuals who are equity owners, officers, directors, trustees, debt holders, and key employees of the applicant. "Debt holder" means any individual who currently holds, or has held in the last five years, at least 5% of the applicant's total debt liability. "Key Employee" means any individual employed by the applicant in a supervisory capacity or empowered to make discretionary decisions with respect to solid waste or hazardous waste operations of the company within New Jersey, but shall not include employees exclusively engaged in the physical or mechanical collection, transportation, treatment, storage, transfer or disposal of solid waste or hazardous waste. N.J.S.A. 13:1E-127(f). Use additional copies of this page, as necessary. **Each individual listed below must submit a Personal History Disclosure Short Form, and must sign a Consent Form for Disclosure of Social Security Numbers.**

Name: _____

Address: _____

SSN: _____ Date of Birth: _____ % of Equity or Debt Held: _____

Dates of Involvement with Applicant (Month/Year): ____/____ to ____/____

Description of Involvement with Applicant

Name: _____

Address: _____

SSN: _____ Date of Birth: _____ % of Equity or Debt Held: _____

Dates of Involvement with Applicant (Month/Year): ____/____ to ____/____

Description of Involvement with Applicant

PART V: INVOLVED INDIVIDUALS, continued**Name:** _____

Address: _____

SSN: _____ Date of Birth: _____ % of Equity or Debt Held: _____

Dates of Involvement with Applicant (Month/Year): ____/____ to ____/____

Description of Involvement with Applicant**Name:** _____

Address: _____

SSN: _____ Date of Birth: _____ % of Equity or Debt Held: _____

Dates of Involvement with Applicant (Month/Year): ____/____ to ____/____

Description of Involvement with Applicant**Name:** _____

Address: _____

SSN: _____ Date of Birth: _____ % of Equity or Debt Held: _____

Dates of Involvement with Applicant (Month/Year): ____/____ to ____/____

Description of Involvement with Applicant**Name:** _____

Address: _____

SSN: _____ Date of Birth: _____ % of Equity or Debt Held: _____

Dates of Involvement with Applicant (Month/Year): ____/____ to ____/____

Description of Involvement with Applicant

PART VI: LICENSES AND PERMITS HELD

11. List **all** licenses, permits, registrations, approvals, and operating authorizations issued to the applicant in the last ten years by any county, state or federal environmental regulatory agency, including the New Jersey Department of Environmental Protection and the United States Environmental Protection Agency. Include a copy of each document. Use additional copies of this page, as necessary.

Description of Document: _____

Document was in use from (Month/Year) ____/____ to ____/____

Issuing Agency: _____ Agency reference #: _____

Description of Document: _____

Document was in use from (Month/Year) ____/____ to ____/____

Issuing Agency: _____ Agency reference #: _____

Description of Document: _____

Document was in use from (Month/Year) ____/____ to ____/____

Issuing Agency: _____ Agency reference #: _____

Description of Document: _____

Document was in use from (Month/Year) ____/____ to ____/____

Issuing Agency: _____ Agency reference #: _____

PART VII: ENVIRONMENTAL VIOLATIONS HISTORY

12. List all Summonses, Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, civil complaints, or Notices of Intent to Deny or Revoke any license or permit, or similar notices, issued to:

- a. The applicant, any predecessor of the applicant, or any previous name under which the applicant operated;
- b. Subsidiaries: Any business in which the applicant holds at least 25% of equity or debt liability;
- c. Sister companies: Any business in which the applicant's parent company holds more than 25% of the equity or debt liability; or
- d. Any Officer, Director, Partner, Joint Venturer or Key Employee of the applicant, and any business concern owned or controlled by any such individual;

within the past 10 years by any county, state or federal environmental enforcement agency, including the New Jersey Department of Environmental Protection, the New Jersey Board of Public Utilities, and the United States Environmental Protection Agency. Include a copy of each document. Use additional copies of this page, as necessary.

Name of entity cited: _____ **Date of issuance:** _____

Issuing Agency: _____ Amount of penalty or damages: \$_____

Description of Allegations: _____

Name of entity cited: _____ **Date of issuance:** _____

Issuing Agency: _____ Amount of penalty or damages: \$_____

Description of Allegations: _____

PART VIII: CIVIL JUDGMENTS AND PENDING LITIGATION

13. OTHER JUDGMENTS. List and explain all judgments of liability in excess of \$60,000 rendered against the applicant in the past 10 years. Notwithstanding the foregoing, you need not list "slip and fall" cases or cases arising out of automobile or truck accidents if no fatality occurred. Use additional copies of this page, as necessary.

Caption of case: _____

Docket #: _____ Venue: _____

Date judgment or order entered: _____ Amount of judgment: \$ _____

Description of case: _____

Caption of case: _____

Docket #: _____ Venue: _____

Date judgment or order entered: _____ Amount of judgment: \$ _____

Description of case: _____

14. PENDING SUITS. List and explain all civil suits and arbitration cases in which the applicant is presently involved as a party. Notwithstanding the foregoing, you need not list "slip and fall" cases; cases arising out of automobile or truck accidents if no fatality occurred; and suits seeking less than \$60,000 in damages where no other relief is sought. Use additional copies of this page, as necessary.

Caption of case: _____

Docket #: _____ Venue: _____

Relief sought: _____

Description of case: _____

PART IX: CRIMINAL PROCEEDINGS

15. List all indictments, accusations, summonses, complaints, and informations filed against the applicant for any crime or felony. List all accusations, summonses, complaints, and informations filed against the applicant within the last 10 years for any misdemeanor, disorderly persons offense, or criminal violation. Notwithstanding the foregoing, you need not list convictions for any violation of Title 39 of the Revised Statutes (N.J.S.A.) other than a violation of the provisions of N.J.S.A. 39:5B-18 et seq., N.J.S.A. 39:5B-25 et seq. or N.J.S.A. 39:5B-30 et seq., or comparable motor vehicle offenses in jurisdictions other than New Jersey. Death by Auto or Vehicular Homicide is considered a criminal offense and must be listed under this item.

Entity charged: _____ **Date of Charge:** _____

Docket #: _____ Jurisdiction: _____

Alleged crimes or offenses: _____

Disposition or Sentence: _____

Entity charged: _____ **Date of Charge:** _____

Docket #: _____ Jurisdiction: _____

Alleged crimes or offenses: _____

Disposition or Sentence: _____

Entity charged: _____ **Date of Charge:** _____

Docket #: _____ Jurisdiction: _____

Alleged crimes or offenses: _____

Disposition or Sentence: _____

Entity charged: _____ **Date of Charge:** _____

Docket #: _____ Jurisdiction: _____

Alleged crimes or offenses: _____

Disposition or Sentence: _____

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

PART X: FINANCIAL HISTORY

17. DEBT LIABILITY: "Debt liability" means any form of monetary obligation other than an ownership interest. It includes bonds, debentures, notes, mortgages and loans of any kind, secured or unsecured. Describe below the nature of the obligation under the line for "type of debt."

In answering the questions which follow, you may omit accounts payable for goods and services received unless the amount owed to a particular creditor exceeds 5% of the applicant's total debt liability or net worth, whichever is greater. Debt liability also does not include accounts payable for goods and services received if the amount owed to a particular creditor is less than \$10,000.00.

List the following information as to debt liability **currently** held by any chartered lending institution, e.g., a commercial bank or savings & loan association. If you are in doubt as to whether a lender is a state or federally chartered lending institution, check with your lender or with the banking authority in your state. Provide a copy of the debt document. Use additional copies of this page, as necessary.

Institution: _____ **Telephone #:** _____

Description of Debt: _____

_____	_____	\$ _____	\$ _____
Date incurred:	Expected End Date	Original Balance	Present Balance

Institution: _____ **Telephone #:** _____

Description of Debt: _____

_____	_____	\$ _____	\$ _____
Date incurred:	Expected End Date	Original Balance	Present Balance

Institution: _____ **Telephone #:** _____

Description of Debt: _____

_____	_____	\$ _____	\$ _____
Date incurred:	Expected End Date	Original Balance	Present Balance

18. BANKRUPTCY: Has the applicant or a parent company of the applicant filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition within the last 10 years? If so, set forth the following information.

Date of Petition: _____ Venue: _____

Chapter: ☐7 ☐11 ☐13 Disposition: _____

Date of Petition: _____ Venue: _____

Chapter: ☐7 ☐11 ☐13 Disposition:_____

Date of Petition: _____ Venue: _____

Chapter: []7 []11 []13 Disposition:_____

19. If the applicant or its New Jersey solid/hazardous waste business has been organized within the last 10 years, or is yet to be organized, describe the source and amounts of the money which enabled or will enable it to commence operations. Examples: "\$25,000 from personal savings" (list bank name and account number); "\$25,000 loan from Uncle Fred;(provide full name and address of the individual) "reinvested profits from another business" (provide name and address of the business), etc. Use additional copies of this page, as necessary.

[illegible]

20. SUBCONTRACTORS, BROKERS, AND CONSULTANTS.

a. List the following as to all subcontractors, brokers and consultants with which the applicant has written or oral agreements or has had such agreements within the past 5 years relating to the collection, transportation, treatment, storage, transfer, recycling or disposal of solid waste or hazardous waste. Provide a copy of the agreement. Use additional copies of this page, as necessary.

Name: _____ **Telephone #:** _____

Address: _____

FEID#: _____ **NJDEP A901 #:** _____ **CPCN #:** _____

Contact Person & Position: _____

Start Date: _____ **End Date:** _____

Description of Agreement: _____

b. List all persons/entities for which the applicant has acted as a subcontractor, broker or consultant under written or oral agreements within the past 5 years relating to the collection, transportation, treatment, storage, transfer, recycling or disposal of solid waste or hazardous waste. Provide a copy of the agreement. Use additional copies of this page, as necessary.

Name: _____ **Telephone #:** _____

Address: _____

FEID#: _____ **Start Date:** _____ **End Date:** _____

Contact Person & Position: _____

Description of Agreement: _____

PART XI: CONSENT FORM FOR DISCLOSURE OF SOCIAL SECURITY NUMBERS

Every individual listed in Part xx: Involved Individuals must submit a signed copy of this form.

SOCIAL SECURITY NUMBERS

Notice required under Section 7(b) of the
Federal Privacy Act of 1974

Under section 7(b) of the Privacy Act of 1974, 5 U.S.C. 552a(note), any government agency which requests an individual to disclose his Social Security account number must inform that individual whether the disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited, and what uses will be made of it.

The Department of Environmental Protection is authorized to request Social Security numbers by the section of the A-901 statute that defines the content of the Disclosure Statement, N.J.S.A 13:1E-127(e). The Social Security number is used as a secondary identifier by the New Jersey State Police when conducting background investigations of individuals listed on disclosure statements. It is used routinely to ensure correct identification when the State Police conduct checks of criminal history records maintained by the State and Federal governments. In specific investigations which may involve examination of particular records obtained from outside sources, the Social Security number may be used to determine whether the individual named in the records and the individual under investigation are the same or different persons.

The listing of Social Security numbers on the disclosure forms is voluntary. Under Section 7(a) of the Privacy Act, the Department cannot deny or revoke a license or impose any penalty because of an individual's refusal to disclose a Social Security number. However, the absence of a Social Security number as a secondary identifier may delay processing of and decisions on licensure because of the additional investigation time which may be necessary to confirm identifications without the Social Security number. In addition, there is the possibility that the absence of a Social Security number may result in the initial identification of an individual as having a criminal record which actually is that of another person. That, again, may result in a delay in the decision on licensure.

The following individual hereby certifies that he or she has read the social security notice on this page and consents to the disclosure of his or her social security number for the limited purposes set forth therein.

printed name

signature

date

PART XII: RELEASE AUTHORIZATION

To all courts, probation departments, selective service boards, employers, educational institutions, banks, financial and other such institutions, law enforcement agencies, military records custodians, credit reporting agencies, taxation authorities (including the I.R.S.) and foreign and domestic governmental agencies (federal, state and local), and any other institution or person without exception:

On behalf of _____, I, _____,
(Complete Name of Business Entity)

authorize the Attorney General of New Jersey to conduct an investigation into the background of the said enterprise for the purpose of determining the suitability of the enterprise to hold a solid waste or hazardous waste license, as provided under N.J.S.A. 13:1E-126 et seq.

I hold the authority to sign this Release Authorization. Therefore, you are hereby authorized to release any and all information pertaining to the said enterprise, documentary or otherwise, as requested by an appropriate employee, agent or representative of the Attorney General of New Jersey.

This authorization shall supersede and countermand any prior request or authorization to the contrary. A photostatic copy of this authorization will be considered as effective and valid as the original.

Dated: _____

Signature: _____

Type or Print Name

Type or Print Title/Position

State of New Jersey)
)
County of _____)

I certify that on the _____ day of _____, _____,
(Name)

Came before me in person and stated to my satisfaction that he/she:

- (A) made the attached instrument; and
- (B) executed this instrument as his/her own act.

_____.
(Notary public)
(Seal)

PART XIII: BUSINESS CONCERN DISCLOSURE STATEMENT CERTIFICATION

This Business Concern Disclosure Statement must be signed and certified below by a responsible official of the applicant. Use additional copies of this page, as necessary.

I, _____, hereby certify that I have read, in its entirety, the attached Business Concern Disclosure Statement of

(Full Legal Name of Business Entity)

as well as the instructional material provided with this document, and that the information provided is true to the best of my knowledge. I further certify that I have caused a diligent effort to be made by the employees and agents of the applicant to honestly and thoroughly respond to the inquiries in this Business Concern Disclosure Statement and that I have ensured that the information provided on this Business Concern Disclosure form has been verified. I am aware that if the foregoing statement made by me is willfully false, I am subject to criminal prosecution. I further understand that fraudulent, deceptive, misleading or negligent answers may result in the denial of the applicant's license.

Dated: _____

Signature: _____

Type or Print Name

Type or Print Title/Position

State of New Jersey)
)
County of _____)

I certify that on the _____ day of _____, _____, _____
(Name)

Came before me in person and stated to my satisfaction that he/she:

- (A) made the attached instrument; and
- (B) executed this instrument as his/her own act.

(Notary public)
(Seal)

APPENDIX A: BUSINESS CONCERN DISCLOSURE STATEMENT INSTRUCTIONS

For questions related to the A-901 Program, feel free to contact the New Jersey Division of Law, Environmental Enforcement Section, A-901 Unit, at (609) 292-6018 or 6019.

1. WHO MUST FILL OUT THIS FORM. Companies seeking a Temporary A901 License for Hurricane Sandy Cleanup must complete this form.

2. WHO IS AN APPLICANT. You are an applicant if you are not currently operating any waste management business licensed in New Jersey. Even if you already operate an existing business, you are an applicant if you are seeking a license for a new activity. Example: a transporter seeking a license to operate a transfer station.

3. ALL QUESTIONS MUST BE ANSWERED. Read every question carefully before answering it. Answer every question completely. Do not leave any blank spaces. Provide a response in each section. Each item pertains to all of the entities and individuals listed above. If an answer is "none", write "none". If the item is not applicable, write "not applicable" or "N/A", with an explanation of why. Unanswered questions will result in the application being deemed incomplete and, therefore, returned for additional information.

4. ANSWER COMPLETELY AND TRUTHFULLY. Failure to answer any question completely may result in your statement being returned to you for supplementation of your answers, and will delay processing of your application. However, you should not answer "Do Not remember", or similar words, simply because the information is not immediately at hand. You are expected to make reasonable efforts to check your records so that you can answer the questions completely. Failure to answer truthfully may result in a denial of your application.

5. ADDITIONAL SPACE. If you need additional space to answer a question, make and use copies of the appropriate pages. Insert additional pages immediately following the page on which the question you are answering initially appears.

6. FEE CALCULATION. Certain fees must be paid to the Department of Environmental Protection and the Office of the Attorney General in connection with the processing of this Disclosure Statement. The Division of Law will calculate the fee upon the review of the Disclosure Statement and forward an invoice to the applicant - **DO NOT SEND PAYMENT WITH THE SUBMISSION OF THIS DISCLOSURE DOCUMENT.**

7. PERSONAL HISTORY DISCLOSURE FORMS. Temporary Hurricane Sandy Cleanup Personal History Disclosure Forms must be submitted by the equity holders, directors, officers, partners and key employees of the applicant or license-holder itself, except that if a business concern is publicly traded, holders of 5% or less of its equity need not file Personal Histories.

In addition, Personal History Disclosure Forms must be filed by the equity holders, directors, partners and officers of all parent companies of the applicant or license-holder. This applies to all immediate, intermediate and ultimate parent companies. Personal Histories must be submitted along with the Business Concern Disclosure Statement.

Please Note: If a business concern has more than 4 officers or 2 key employees, contact the Division of Law at the numbers or address noted below prior to submitting the personal histories for those officers or key employees.

8. SECOND-LEVEL BUSINESS CONCERN DISCLOSURE STATEMENTS. Second-Level Business Concern Disclosure Statements (Second-Level Forms) must be filed by all parent companies of the applicant, including all immediate, intermediate and ultimate "parent" companies. Each parent company must file a separate Second-Level Business Concern Disclosure Statement.

Parent companies include any business concern which holds any equity or debt liability in the applicant or license-holder itself, or which holds, directly or through another entity, any debt liability or equity in a parent company. In other words, all business entities "upstream" of the applicant or license holder, i.e., parents, grandparents, great-grandparents, etc. must file Second-Level Business Concern Disclosure Statements. These Second-Level Forms must be submitted along with the Business Concern Disclosure Statement of the applicant or license holder.

Limitations: If the license-holder or applicant or a parent business concern is a publicly-traded corporation, a Second-Level Form need not be filed by a holder of 5% or less of the equity or debt liability of the publicly-traded entity. Also, please note that debt liability does not include accounts payable for goods and services received unless the amount owed to a particular creditor exceeds 5% of the business concern's total debt liability or net worth, whichever is greater. Debt liability also does not include accounts payable for goods and services received if the amount owed to a particular creditor is less than \$10,000.00. Also, if the debt liability of the applicant, license-holder or a parent business concern is held by a chartered lending institution, then that chartered lending institution is not required to file a Second-Level Form.

9. LESSOR BUSINESS CONCERN DISCLOSURE STATEMENTS. Business Concern Disclosure Statements for Lessors must be filed by all applicants, permittees and licensees for business concerns from which they lease ten or more solid waste vehicles and operators and which are not themselves permittees or licensees, or when such leased vehicles represent at least 20 percent of the permittee's or licensee's fleet of solid waste vehicles, or when they lease 20 or more solid waste operators from a single lessor which is not a permittee or licensee, as well as personal history disclosure statements for the lessor's directors, officers, key employees, partners, and equity holders. N.J.A.C. 7:26-16.6(i) and (j).

10. ATTACHMENTS AND/OR EXHIBITS. If you are required or wish to submit any document in connection with your answer to any question, refer to it in your answer as, for example, "Attachment No.____" or "Exhibit No.____" (be consistent) and attach it at the end of the form.

11. FINGERPRINTS. IF YOU LIVE OR WORK IN NEW JERSEY, OR WITHIN FIFTY MILES OF NEW JERSEY:

New Jersey has changed from the traditional "ink and roll" method to the "Live Scan Method" for individuals who work or reside within an approximate 50 mile radius of New Jersey. After you have submitted your application, you will receive instructions from New Jersey State Police on the fingerprinting method.

IF YOU LIVE OR WORK FURTHER THAN FIFTY MILES FROM NEW JERSEY:

Individual equity holders, directors, officers or key employees who work and reside outside of a 50 mile radius of the State of New Jersey can obtain fingerprint cards at: <http://www.state.nj.us/dep/dshw/a901/a901frms.htm>. Follow the instructions that accompany the fingerprint cards. You can also contact the A-901 Unit for assistance at 609-292-6018.

12. TYPE OR PRINT YOUR ANSWERS. Type or print in legible block letter style. Handwritten forms will be returned if entries are illegible. This form is available by e-mail or online at www.state.nj.us/dep/dshw. Call (609) 292-6018 or 6019 to have the form e-mailed to you.

WARNING

FRAUDULENT, DECEPTIVE OR MISLEADING ANSWERS MAY RESULT IN THE DENIAL OR REVOCATION OF YOUR LICENSE. IN ADDITION, ANY PERSON WHO KNOWINGLY OR RECKLESSLY MAKES FALSE OR MISLEADING STATEMENTS ON THIS FORM MAY BE SUBJECT TO CRIMINAL PROSECUTION.

Be especially careful not to leave out information that might create the impression you are trying to hide it. For example, a minor criminal conviction will probably not disqualify your firm from being licensed; however, attempting to conceal the conviction may lead to a finding of a lack of trustworthiness, and result in disqualification. Omitting such information from this form, even unintentionally, may result in your trustworthiness being questioned. Even if the question is resolved in your favor, your application may be delayed while the inquiry goes forward.

If you are unsure of, or do not remember the answer to a question, indicate this in some way - for example, by entering "do not remember." This may result in additional inquiries from the Department or the Attorney General's office but, if entered in good faith, will avoid the implication that you are trying to conceal information. However, you should not answer "do not remember" simply because the information may not be immediately at hand. You are expected to make reasonable efforts to check your records so that you can answer the question completely.

APPENDIX B: DISQUALIFYING CRIMES

Pursuant to N.J.S.A. 13:1E-133(b) and N.J.A.C. 7:26-16.8(b), an applicant, permittee or licensee may be disqualified from holding a solid waste or hazardous waste license "if any person required to be listed in the disclosure statement or shown to have a beneficial interest in the business of the applicant, permittee, or the licensee" has been convicted of any of 22 categories of crimes listed in the statute.

The term "any person required to be listed in the disclosure statement" includes owners, stockholders, officers, directors, partners, key employees and holders of debt liability. The term "shown to have a beneficial interest" is meant to cover situations where an individual has an informal interest that may not show up on a disclosure statement-- such as a regular cash payment from company funds.

Disqualifying crimes are any of the following under New Jersey laws, or equivalent laws of any other jurisdiction.

1. Murder;
2. Kidnapping;
3. Gambling;
4. Robbery;
5. Bribery;
6. Extortion;
7. Criminal usury;
8. Arson;
9. Burglary;
10. Theft and related crimes;
11. Forgery and fraudulent practices;
12. Fraud in the offering, sale or purchase of securities;
13. Alteration of motor vehicle identification numbers;
14. Unlawful manufacture, purchase, use or transfer of firearms;
15. Unlawful possession or use of destructive devices or explosives;
16. Violation of N.J.S.A. 2C:35-5, except N.J.S.A. 2C:35-10 or possession of 84 grams or less of marijuana,
17. Racketeering, N.J.S.A. 2C:41-1 et seq.
18. Violation of criminal provisions of the "New Jersey Antitrust Act," N.J.S.A 56:9-1 et seq.
19. Any purposeful, knowing, willful or reckless violation of the criminal provisions of any federal or state environmental protection laws, rules, or regulations, including but not limited to solid waste or hazardous waste management law, rules or regulations;
20. Violation of N.J.S.A. 2C:17-2;
21. Perjury, false swearing or any other offense set forth in Chapter 28 of the New Jersey Code of Criminal Justice, N.J.S.A. 2C:28-1 et seq.
22. Any violation of the Solid Waste Utility Control Act, N.J.S.A. 48:13A-1 et seq. or P.L. 1981, c. 221 (N.J.S.A.48:13A-6.1).

NOTICE: These descriptions are for information purposes only. For official text you must consult the statute, N.J.S.A. 13:1E-126 et seq., and its implementing regulations at N.J.A.C. 7:26-16.1 et seq.

APPENDIX C: REHABILITATION CRITERIA

N.J.S.A. 13:1E-133.1 provides for an exception to the disqualification that would otherwise result from a criminal conviction where the applicant, a licensee or individual demonstrates "by clear and convincing evidence" the convicted person's rehabilitation.

The Department is required to request a recommendation from the Attorney General, and to consider the following factors when weighing the issue of rehabilitation for convicted individuals:

1. The nature and responsibilities of the position which a convicted individual would hold;
2. The nature and seriousness of the crime;
3. The circumstances under which the crime was committed;
4. The date of the crime;
5. The age of the individual when the crime was committed;
6. Whether the crime was an isolated or repeated act;
7. Any evidence of good conduct in the community, counseling or psychiatric treatment received, acquisition of additional academic or vocational schooling, or the recommendation of persons who have supervised the convicted individual since the conviction;
8. The full criminal record of the convicted individual, any record of civil or regulatory violations or notices or any complaints alleging any such civil regulatory violations, or any other allegations of wrong doing.

SEVERANCE OF DISQUALIFYING INDIVIDUALS

As an alternative to demonstrating "rehabilitation", an applicant or licensee may be able to avoid disqualification by severing the interest or affiliation of the person who would otherwise cause disqualification. Under a regulation of the Department, N.J.A.C. 7:26-16.11, companies that choose this course must completely sever the individual's interest or affiliation, and file an affidavit attesting to the terms of the removal.

Applicants and licensees should be aware that severing a disqualifying individual will not necessarily guarantee a license, especially if the presence of the disqualified individual evidences unreliability in the company management.